



The **39th** Running of the **Edwin Krawitz Memorial Law Day Race Judicata**

5-Mile & 5k Race / Walk ~ Timed Events!



*Proceeds benefit **AWSOM**— Animal Welfare Society of Monroe*

Donations Welcome—Go to www.awsomanimals.org for the list!

Sunday, May 1, 2022

**Races begin at 9:00 AM
Rain or Shine**

5-Mile or 5k Registration

Pre-Registration:

MUST Register by April 8, 2022

\$20.00 Adult

\$15.00 Children ages 17 & under

Registration after April 8, 2022

\$25.00 Adult

\$20.00 Children ages 17 & under

Please mail registration form and payment to:

Monroe County Bar Association

913 Main Street, Stroudsburg, PA 18360

Please make checks payable to: **MCBA**

Dogs are welcome—MUST be on leash at all times—5k Race / Walk ONLY

5-Mile and 5k Race / Walk Both Timed! Awards! Prizes!

Day of Event Check-In & Start at:

Monroe County Bar Association

913 Main Street, Stroudsburg, PA 18360

CHECK-IN/REGISTRATION: 8:00-8:45 AM

Awards/Refreshments at Monroe County Bar Association

1st Overall Male / Female

1st, 2nd, 3rd Judge / Attorney, Male / Female

1st, 2nd, 3rd Age Groups:

≤19, 20-29, 30-39, 40-49, 50-59, 60-69, 70+

*Questions? Monroe County Bar Association
570.424.7288 or info2@monroebar.org*

Register online at <https://www.pretzelcitysports.com/onlineform1.php?id=1693>

The **39th** Annual Edwin Krawitz
Memorial **Law Day Race Judicata**

Sunday, May 1, 2022

Runner's #

In consideration of accepting this entry, I, the undersigned, intending to be legally bound, hereby for myself, by heirs, executors and administrators, waive and release any and all rights and claims for damages I may have against any charity/beneficiary of this event, Monroe County Bar Association, Borough of Stroudsburg, Township of Stroud and any and all sponsors and their representatives, successors and assigns for any and all injuries suffered by me in said event. I attest and verify that I will participate in this event as a footrace entrant, that I am physically fit and have sufficiently trained for the completion of this event, and my physical condition has been verified by a licensed Medical Doctor.

Signature

Date

Parent Signature if under 18 years of age

Last Name

First Name

Phone Number

Address

City

State

Zip

Email Address

Please indicate for result scoring and award purposes:

5-Mile Race ___ 5k Run/Walk ___

Age on Race Day: ___ Date of birth: ___/___/___ Gender: ___

___ Up to 19 ___ 20-29 ___ 30-39 ___ 40-49 ___ 50-59 ___ 60-69 ___ 70 &Up

Attorney/Judge:

Yes: ___ No: ___

Race shirt size

S ___ M ___ L ___

XL ___ XXL ___

1st 100 Participants